

Tax increases, an individual mandate to carry health insurance, frustrating disincentives for employers to offer private coverage – there are plenty of reasons to roll back and replace the 2010 health care law. But each of the 15 members of the new Independent Payment Advisory Board (IPAB) provides one more reason to scrap this law and start over.

This Board was created in the Affordable Care Act and charged with finding \$500 billion in Medicare cuts over 10 years by reducing reimbursements for doctors and hospitals. Another \$500 billion in cuts to Medicare was extracted from the supplemental insurance program. So, all told, the ACA takes \$1 trillion from the program.

The IPAB, however, is particularly bad policy because it puts bureaucrats in the position of being able to choose which treatments and procedures are going to be reimbursed under Medicare and which will not. Health care rationing in this way takes important choices out of the hands of patients and doctors.

Fifteen members of this unelected Board (or fewer) will make Medicare decisions affecting tens of millions of Americans. Only a two-thirds majority of Congress could overturn their decisions. There is no review process, and their budget is automatically assigned by the administration. The IPAB never has to come to Congress to justify its funding or its existence.

I voted against this bill two years ago, and last week I voted again to repeal the IPAB and many other damaging provisions of the ACA.

Throughout the health care debate, this Administration has contended that Medicare can only cut costs by cutting payments for services. To me, this is the worst way to treat the Americans who have paid into the Medicare system their whole lives in order to access health care in their retirement years. Instead, there are countless ways to reduce Medicare costs without compromising services, especially thought competition.

There is no reason, for example, why the ACA should have required the federal government to fully cover Medicare Part D prescription drug expenses ONLY for name-brand prescription drugs – but it does, and it is now the law.

There is no reason Medicare cannot shop for medical devices and medicines in bulk, like the Veterans Administration does, but it cannot.

There is no reason why the Administration should cut a trillion dollars in benefits to today's Medicare patients without agreeing to any long-term changes to Medicare which don't even affect Americans paying into the system today – like raising the Medicare eligibility age for Americans born after 1996.

And finally, there is no reason why 15 people in a federal office building somewhere should be able to pick and choose the health care services available to Americans under a program that is supposed to treat them like patients, not like entries in a financial ledger.

When I talk to people in Missouri about their frustrations with the Medicare program today, I see a pattern emerging. They often, very justifiably, feel like they don't matter to the people who are supposed to be helping them. If American health care patients are allowed to become simple charges of the federal government, then we can expect far worse days ahead for our system and our country. It's why repealing this law is so important.